TEMPORARY EVENT FOOD SERVICE VENDOR APPLICATION

Madison County Health Department Madison County Sanitarian PO Box 278 Virginia City, MT 59755

TEL: (406) 843-4275 FAX: (406) 843-5362

Name of Ev	rent						
Date and Ti	me of Event						
	ganization						
Mailing Add	dress						
City	ST	Zip	Day Telephon	e			
Person in Cl	harge of Booth						
Is your orga	anization non-profit?	Yes	No				
If <u>YES</u>	You are exempt from licen	sing requirer	nents. You must still	complete the vendor application.			
If NO	You must submit a copy of a current Montana department of Public Health and Human Services Food Service License with a catering endorsement (F10) or mobile food service endorsement (F7) with this completed application.						
OR	A temporary Food Establishment License is required. Please submit one of the following licensing fees with this completed application. <u>Make check payable to MDPHHS.</u>						
□ \$60.00	Establishments with 2 or fewer	2 or fewer employees working at any one time. Office use Only: □ Cash □ Check #					
□ \$75.00	Establishments with 3 or more	Receipt #					
D1 (111.1							

Please fill in event information on the following chart.

List each event you will be participating at on a separate line.

Name and location of Event	Date(s) of Event	Start time of event	A, B, C, D from chart below
1.			
2.			
3.			
4.			
5.			

Food categories. Use this chart to complete the 4th column above (use every category that applies).

- A. Selling prepackaged snacks (chips, candy, gum, nuts), ice cream novelties, whole fruits, canned or bottled soda/water/juice, bulk nuts, dispensed soda, etc.
- B. Selling fruit cups, unwrapped bakery, unwrapped desserts, scooped ice cream without toppings, etc.
- C. <u>Making</u> cotton candy, lemonade, sno-cones, soft-serve ice cream, fruit cups, popcorn, sundaes, floats, cakes, pastries, cookies, funnel cakes, fritters, donuts, espresso, cappuccino, tea, fruit juice, smoothies, confections, roasted nuts, coffee, kettle corn, etc.
- D. Selling potentially hazardous foods ie, chicken, ribs, sandwiches, roasted corn, baked potatoes, hamburgers, hot dogs, brats, tacos, etc.

List food items below and check preparation site (Check all that apply).

Note: No food preparation may be done at home. All food must be prepared in an approved licensed kitchen.

Menu items. Do not include canned bottled beverages or prepackaged snacks		d ✓ prepared at event site	✓ prepared off site	Madison Notes	n County Sanitarian		
If you need more sp	agas attagh a shagt o	f nanar					
•		• •					
Name and address	for licensed comn	nissary kitchen? _					
MDPHHS Food L	icense # of commi	ssary kitchen.					
Food Equipment		-	-		als used for booth construction (circle)		
control during op					T21	O	
Hot holding Steam table	Reheating or cooking	Cold holding Refrigerator/free:	zer Walls Wood		Floors Wood racks,	Overhead covering	
Oven	Oven	Refrigerated truc			Plywood,	(describe)	
Charcoal grill	Charcoal grill	Dry ice		sheets	Shredded bark,	(describe)	
Gas grill	Gas grill	Drained ice		screen	Concrete,		
Steamers	Stove	Other	Other	5010011	Asphalt		
Stove	Fryers				Other:		
Hot holding case	Other:				other.		
Other	other.						
List other equipme	ent (i.e. sinks/table	s) to be used.					
List areas of booth	that will be screen	ned					
What will you be u	using to wash uten	sils?					
I hereby certify the without prior perm					that any deviation inal approval.	from the above	
Applicant Signature				_	Date		
Madison County Sanitarian				_	Date		